



ALASKA DEPARTMENT OF ENVIRONMENTAL CONSERVATION

OIL & HAZARDOUS SUBSTANCES SPILL NOTIFICATION

ADEC SPILL #		ADEC FILE #		ADEC LC	
PERSON REPORTING		PHONE NUMBER		REPORTED HOW? Troopers phone fax	
DATE/ TIME OF SPILL		DATE/TIME DISCOVERED		DATE/TIME REPORTED	
LOCATION/ADDRESS		LAT.		SUBSTANCE TYPE A) CR EHS HS NC PW UNK B) CR EHS HS NC PW UNK	PRODUCT A) B)
		LONG.			
QUANTITY SPILLED <input type="checkbox"/> gallons <input type="checkbox"/> pounds	QUANTITY CONTAINED <input type="checkbox"/> gallons <input type="checkbox"/> pounds	QUANTITY RECOVERED <input type="checkbox"/> gallons <input type="checkbox"/> pounds	QUANTITY DISPOSED <input type="checkbox"/> gallons <input type="checkbox"/> pounds		
POTENTIAL RESPONSIBLE PARTY C-Plan Holder? YES <input type="checkbox"/> NO <input type="checkbox"/>		FACILITY TYPE			
SOURCE OF SPILL					<input type="checkbox"/> >400 GT Vessel?
CAUSE OF SPILL (List Primary Cause first)					<input type="checkbox"/> Accident <input type="checkbox"/> Human Factors <input type="checkbox"/> Structural/Mechanical <input type="checkbox"/> Other
CLEANUP ACTIONS					
DISPOSAL METHODS AND LOCATION					
RESOURCES AFFECTED/THREATENED (Water sources, wildlife, wells. etc.)				AIR <input type="checkbox"/>	LAND <input type="checkbox"/>
				MARINE <input type="checkbox"/>	FRESH <input type="checkbox"/>
				SURF. AREA AFFECTED	
				SURF. TYPE	
COMMENTS					

DEC USE ONLY

SPILL NAME, IF ANY		NAMES OF DEC STAFF RESPONDING		C-PLAN MGR NOTIFIED YES <input type="checkbox"/> NO <input type="checkbox"/>	
DEC RESPONSE <input type="checkbox"/> phone follow-up <input type="checkbox"/> field visit <input type="checkbox"/> took report		CASELOAD CODE <input type="checkbox"/> First and Final <input type="checkbox"/> Open/No LC <input type="checkbox"/> LC assigned		CLEANUP CLOSURE ACTION <input type="checkbox"/> NFA <input type="checkbox"/> Monitoring <input type="checkbox"/> Transferred to CS or STP	
STATUS OF CASE (circle)		OPEN CLOSED		DATE CASE CLOSED _____	
COMMENTS:					
REPORT PREPARED BY				DATE	



ALASKA DEPARTMENT OF ENVIRONMENTAL CONSERVATION

OIL & HAZARDOUS SUBSTANCES SPILL NOTIFICATION

ADEC SPILL #		ADEC FILE #		ADEC LC	
PERSON REPORTING Bob Cleveland		PHONE NUMBER 235-7556		REPORTED HOW? <input type="checkbox"/> Troopers <input checked="" type="checkbox"/> phone <input type="checkbox"/> fax	
DATE/ TIME OF SPILL 4/15/05 0830		DATE/TIME DISCOVERED 4/15/05 0900		DATE/TIME REPORTED 4/15/05 1015	
LOCATION/ADDRESS Perl Rock, south side of Perl Island Kennedy Entrance Cook Inlet		LAT. 59 06'N	LONG. 151 41'W	SUBSTANCE TYPE A) CR EHS HS <input checked="" type="checkbox"/> PW UNK B) CR EHS HS NC PW UNK	PRODUCT A) North Slope Crude Oil B)
QUANTITY SPILLED 380,000 bbls <input type="checkbox"/> gallons <input type="checkbox"/> pounds	QUANTITY CONTAINED 0 <input type="checkbox"/> gallons <input type="checkbox"/> pounds	QUANTITY RECOVERED 0 <input type="checkbox"/> gallons <input type="checkbox"/> pounds	QUANTITY DISPOSED 0 <input type="checkbox"/> gallons <input type="checkbox"/> pounds		
POTENTIAL RESPONSIBLE PARTY C-Plan Holder? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Tesoro Alaska Company		FACILITY TYPE TAPS trade vessel			
SOURCE OF SPILL T/V Cook Inlet				<input checked="" type="checkbox"/> >400 GT Vessel?	
CAUSE OF SPILL (List Primary Cause first) Power loss caused vessel to drift into Perl Rock and break apart on the rocks				<input type="checkbox"/> Accident <input type="checkbox"/> Human Factors <input checked="" type="checkbox"/> Structural/Mechanical <input type="checkbox"/> Other	
CLEANUP ACTIONS None					
DISPOSAL METHODS AND LOCATION n/a					
RESOURCES AFFECTED/THREATENED (Water sources, wildlife, wells, etc.)		wildlife, commercial and sport fishing, subsistence		AIR <input type="checkbox"/> LAND <input type="checkbox"/> MARINE <input checked="" type="checkbox"/> FRESH <input type="checkbox"/>	SURF. AREA AFFECTED 20 square miles
SURF. TYPE water					
COMMENTS Response actions already taken are: Command Post and ICS establishment; overflight; assessment of quantity spilled					

DEC USE ONLY

SPILL NAME, IF ANY T/V Cook Inlet		NAMES OF DEC STAFF RESPONDING		C-PLAN MGR NOTIFIED YES <input type="checkbox"/> NO <input type="checkbox"/>	
DEC RESPONSE <input type="checkbox"/> phone follow-up <input type="checkbox"/> field visit <input type="checkbox"/> took report		CASELOAD CODE <input type="checkbox"/> First and Final <input type="checkbox"/> Open/No LC <input type="checkbox"/> LC assigned		CLEANUP CLOSURE ACTION <input type="checkbox"/> NFA <input type="checkbox"/> Monitoring <input type="checkbox"/> Transferred to CS or STP	
STATUS OF CASE (circle) OPEN CLOSED		DATE CASE CLOSED			
COMMENTS:					
REPORT PREPARED BY				DATE	

Additional Instructions Page: **ADEC Spill Notification**

By clicking on the **i**, you've reached this instructional page. Here you can find special instructions on individual text fields.

Page 1:

ADEC Spill #-- This number will be assigned by ADEC for internal reference.

ADEC File #-- This number will be assigned by ADEC for internal reference.

ADEC LC—This number will be assigned by ADEC for internal reference.

SURF. TYPE—This is the oil receiving medium

More Information on this Form

When do you need this form?

After an oil spill has been identified.

Who fills out this form?

A representative with the responsible party.

Who signs this form?

No signature is required.

Where does this form get delivered?

To the ADEC office at: 555 Cordova St. Anchorage, AK 99501.